Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 09/914999 Effective October 1, 2000 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE \_\_\_ OR SMALL ENTITY TOTAL CLAIMS RATE RATE FEE FEE FOR NUMBER FILED NUMBER EXTRA BASIC FEE BASIC FEE 860 OR TOTAL CHARGEABLE CLAIMS 3() minus 20= 10 X\$ 9= X\$18= 180 OR INDEPENDENT CLAIMS minus 3 = X40= X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +135 =+270= OR \* If the difference in column 1 is less than zero, enter \*0" in column 2 TOTAL 1040 OR TOTAL AIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR **SMALL ENTITY** Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL AMENDMENT RATE RATE TIONAL PREVIOUSLY AFTER EXTRA ENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus X40= -X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT MENDMENT RATE TIONAL RATE TIONAL **AFTER** PREVIOUSLY **EXTRA** MENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= οÀ Independent Minus X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) ADDI-ADDI RATE TIONAL TIONAL RATE FEE FEE

AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT. EXTRA
	Total	•	Minus	••	E
	Independent	•	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

X\$ 9=

X4.0=

ADDIT. FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

X\$18=

X80=

ADDIT, FEE

OR +135= +270= OR TOTA TOTAL OR

## RECEIVED CENTRAL FAX CENTER

## IN THE UNITED STATES PATENT OFFICE

AUG 0 8 2005

**Applicant** 

DAVIES, Michael B.

Application No.

09/914,999

Filed

11/13/2001

Title

DOSE PROTECTOR FOR INHALATION DEVICE

Grp./A.U.

3764

Examiner

BROWN, Michael A.

Docket No.

. PG3619USW

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

## AMENDMENT C

This Amendment is in response to the Office Action dated 9 February 2005, for which the period for response expired on 9 May 2005. Applicant hereby requests a Three (3) Month Extension of Time to extend the response period up to and including 9 August 2005. Please charge Deposit Account No. 07-1392 in the amount of \$1020.00, or such amount currently required for such extension."

Amendments to the Claims appear on page 2 of this document.

Remarks appear on page 7 of this document.

Please amend the above mentioned application as follows:

/09/2005 SFELEKE1 00000022 071392 09914999

EC. 1505 20 00 00

PAGE 5/13 \* RCVD AT 8/8/2005 10:42:47 AM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/26 \* DMS:2738300 \* CSID:919 483 7988 \* DURATION (mm-ss):03-44

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